



IFW

2165

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/943,670
	Filing Date	August 31, 2001
	First Named Inventor	Brad PIVAR
	Group Art Unit	2165
	Examiner Name	Neveen Abel Jalil
	Total Number of Pages in This Submission	Attorney Docket Number

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is AMENDMENT AND RESPONSE TO OFFICE ACTION (DATED DECEMBER 13, 2005)						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	22	-	20	2	<input checked="" type="checkbox"/> x \$25.00 <input type="checkbox"/> x \$50.00	\$50.00
INDEPENDENT CLAIMS	4	-	5	0	<input type="checkbox"/> x \$100.00 <input type="checkbox"/> x \$200.00	\$0
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$180.00 <input type="checkbox"/> x \$360.00 ONE TIME	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$50.00	
<input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated ____ by ____ month(s) for a fee of \$ ____ so that the period for response is extended to ____ under 37 C.F.R. § 1.136.						
<input type="checkbox"/> The amount of \$ ____ for the Terminal Disclaimer under 37 C.F.R. § 1.20(d) is included in the enclosed credit card payment form to charge .						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of \$50.00 is to cover the total claim fee and other applicable fees.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
14. <input checked="" type="checkbox"/> Customer No. 26263	
Dated: <u>March 13, 2006</u>	 Joel N. Bock, Esq. (Registration No. 36,456)

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: <u>March 13, 2006</u>	 Mary Ann Smolucka

Docket No. 81300520-0008-043
Application No. 09/943,670
Group Art Unit: 2165



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

re Patent Application of:

Brad PIVAR et al.

Application No. 09/943,670

Filed: August 31, 2001

For: SYSTEM FOR INTERACTIVE
PROCESSING OF FORM DOCUMENTS

Group Art Unit: 2165

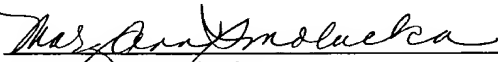
Examiners: Neveen Abel Jalil

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

) I hereby certify that this document (and
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) Alexandria, VA 22313-1450 on

) March 13, 2006

) 
) Mary Ann Smolucka

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Madam:

This paper is responsive to the outstanding Office Action dated December 13, 2005.
Applicants submit that the application is in condition for allowance.

IN THE CLAIMS:

Please amend claims 9 and 11-17, and add new claims 18-25 as follows:

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